UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re: HYO Y NO	Case No. 17-17583
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 06/08/2017.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on \underline{NA} .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was converted on 10/03/2017.
 - 6) Number of months from filing to last payment: <u>3</u>.
 - 7) Number of months case was pending: 5.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: NA.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have not cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$4,200.00 Less amount refunded to debtor \$4,006.80

NET RECEIPTS: \$193.20

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$0.00
Court Costs \$0.00
Trustee Expenses & Compensation \$193.20
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$193.20

Attorney fees paid and disclosed by debtor: \$4,000.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVOCATE HEALTH CARE	Unsecured	884.92	NA	NA	0.00	0.00
ADVOCATE MEDICAL GROUP	Unsecured	50.00	NA	NA	0.00	0.00
AL SCHACHT	Unsecured	5,000.00	NA	NA	0.00	0.00
AMEX	Unsecured	7,739.00	NA	NA	0.00	0.00
ASTORIA BANK	Secured	NA	119,385.33	119,385.33	0.00	0.00
ASTORIA BANK	Secured	6,000,000.00	486,310.47	605,695.80	0.00	0.00
Astoria Federal Savings	Unsecured	1,117.00	NA	NA	0.00	0.00
CHASE CARD MEMBER SERVICE	Unsecured	7,035.00	NA	NA	0.00	0.00
CITY OF PARK RIDGE	Unsecured	200.00	NA	NA	0.00	0.00
Comenity Bank	Unsecured	465.00	NA	NA	0.00	0.00
COSTCO GO ANYWHERE CITICARD	Unsecured	4,838.00	NA	NA	0.00	0.00
DISCOVER BANK	Unsecured	20,533.00	20,533.27	20,533.27	0.00	0.00
ENHANCED RECOVERY CO L	Unsecured	252.00	NA	NA	0.00	0.00
Enterprise	Unsecured	4,935.59	NA	NA	0.00	0.00
FRESENIUS	Unsecured	129.20	NA	NA	0.00	0.00
GARY H SMITH PC	Unsecured	501.89	NA	NA	0.00	0.00
GLENVIEW DIALYSIS CENTER	Unsecured	2,742.73	NA	NA	0.00	0.00
GREG SMITH	Unsecured	5,000.00	NA	NA	0.00	0.00
HECTORS LANDSCAPING	Unsecured	1,060.00	NA	NA	0.00	0.00
HINCKLEY SPRINGS	Unsecured	123.35	NA	NA	0.00	0.00
HOEVEL & ASSOC	Unsecured	0.00	NA	NA	0.00	0.00
IL DEPT OF REVENUE	Unsecured	NA	19.44	19.44	0.00	0.00
IL DEPT OF REVENUE	Priority	273.00	256.29	256.29	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	5,918.00	0.00	0.00	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	NA	0.00	0.00	0.00	0.00
LVNV FUNDING	Unsecured	NA	4,762.96	4,762.96	0.00	0.00
MALCOLM S GERALD & ASSOC	Unsecured	50.00	NA	NA	0.00	0.00
MIKE CHANG	Unsecured	5,000.00	NA	NA	0.00	0.00
NEPHROLOGY ASSOCIATES OF NOR	Unsecured	304.43	NA	NA	0.00	0.00
NORTH PARK CLINIC	Unsecured	40.00	NA	NA	0.00	0.00
NORTH SHORE UNIVERSITY HEALTH	Unsecured	1,655.30	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
QUANTUM3 GROUP LLC	Unsecured	465.00	465.43	465.43	0.00	0.00
QUEST DIAGNOSTICS	Unsecured	2,103.16	NA	NA	0.00	0.00
RYAN KHORSANT	Unsecured	5,000.00	NA	NA	0.00	0.00
SKOKIE LIBRARY	Unsecured	115.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	214.90	NA	NA	0.00	0.00
State Collection Servi	Unsecured	734.92	NA	NA	0.00	0.00
T-MOBILE/T-MOBILE USA INC	Unsecured	NA	70.35	70.35	0.00	0.00
T-MOBILE/T-MOBILE USA INC	Unsecured	NA	91.32	91.32	0.00	0.00
TRANSWORLD SYSTEMS	Unsecured	39.00	NA	NA	0.00	0.00
TRANSWORLD SYSTEMS INC	Unsecured	66.00	NA	NA	0.00	0.00
VERIZON	Unsecured	1,564.00	1,535.07	1,535.07	0.00	0.00
VILLAGE OF NORTH RIVERSIDE	Unsecured	100.00	NA	NA	0.00	0.00
WILLIAM KABAKER	Unsecured	1,500.00	NA	NA	0.00	0.00

Claim	Principal	Interest
<u>Allowed</u>	<u>Paid</u>	<u>Paid</u>
\$605,695.80	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$119,385.33	\$0.00	\$0.00
\$725,081.13	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$256.29	\$0.00	\$0.00
\$256.29	\$0.00	\$0.00
\$27,477.84	\$0.00	\$0.00
	\$605,695.80 \$0.00 \$0.00 \$119,385.33 \$725,081.13 \$0.00 \$0.00 \$256.29 \$256.29	Allowed Paid \$605,695.80 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$119,385.33 \$0.00 \$725,081.13 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$256.29 \$0.00 \$0.00 \$0.00 \$256.29 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$193.20 \$0.00	
TOTAL DISBURSEMENTS :		<u>\$193.20</u>

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12) The trustee certifies that the foregoing summary is true and complete and all administrative matters for which the trustee is responsible have been completed. The trustee requests that the trustee be discharged and granted such relief as may be just and proper.

Dated: 11/13/2017 By:/s/ Tom Vaughn
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.